PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

F97000006536

FILED
99 MAR 30 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F97000006536

1. Corporation Name

Euchem, Inc.

EFFECTIVE DATE
12-9-97

Principal Place of Business

19218 Redwood Road
Cleveland, OH 44110

Mailing Address

300002832153--3
-04/07799--01071--010
****900.00 ****300.00

REINSTATEMENT 12-9-97

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc	
City & State		City & State	
Zip	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida: 12-9-97

5. FEI Number: 34-0973756 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ **$8.75 Additional Fee required for a Certificate of Status**

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
C/D	James A. Karman	3628 Pearl Road	Medina, OH 44256
P/D	Kenneth W. Korach	19218 Redwood Road	Cleveland, OH 44110
D	John H. Morris	3628 Pearl Road	Medina, OH 44256
V/T	Cynthia A. Cicigoi	19218 Redwood Road	Cleveland, OH 44110
S	P. Kelly Tompkins	3628 Pearl Road	Medina, OH 44256
V	Moorman L. Scott, Jr.	19218 Redwood Road	Cleveland, OH 44110

8. Name and Address of Current Registered Agent

Corporation Service Company
1201 Hays Street
Tallahassee Fl. 32301

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc

City | State FL | Zip Code

CR2E061 (12-98)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Karen B. Rozar — REGISTERED AGENT MUST SIGN

Karen B. Rozar, Asst. Sec.
Corporation Service Company

Date

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S.; that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: _____ 3/25/99 (330)273-8883

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

P. Kelly Tompkins - Secretary